



ISSN 2456-3110

Vol 8 · Issue 3

March 2023

Journal of  
**Ayurveda and Integrated  
Medical Sciences**

*www.jaims.in*

**JAIMS**

An International Journal for Researches in Ayurveda and Allied Sciences



**Maharshi Charaka**  
Ayurveda

**Indexed**

# An integrated approach to understand and resolve Polycystic Ovarian Syndrome

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## ABSTRACT

Polycystic ovarian syndrome is a very common problem. It has become more recognized and more common throughout. It is a basic hormone problem and it is widespread throughout the world. Roughly about 10% of the general population has polycystic ovaries. By looking at the features it may seem difficult to treat this condition but by finding out the causality and by following the proper treatment protocol, one can avoid this condition.

**Key words:** Polycystic, Hormone, Syndrome.

## INTRODUCTION

Polycystic ovarian disease is a complex syndromic presentation which involves multiple endocrine glands which affects not only menstruation, it diminishes the reproductive capacity at the same time it also predisposes to various kinds of metabolic disorders as well as endocrinological disruption and ultimately it can be so grave that it can take away the life of a female in the form of endometrial cancer. It is increasing so drastically; incidence has tripped to almost two-threefold.

History: In 1935, Stein and Leventhal explained about PCOS hence is named as Stein and Levanthal syndrome. However, in 1721 Vallisneri, an Italian scientist described a married, infertile women with shiny ovaries with white surface, and size of pigeon eggs. Although it shows the symptoms which starts from

simple irregular menstruation to anovulation to biochemical parameters for the inclusion then ultimately giving rise to ultrasonographic changes in the disease. So considering these various diagnostic milestones, national institute of health in 1990 has concluded that if there is clinical or biochemical evidences for hyper and hypo-androgenism and if there is oligo or anovulation present in the patient then it can be diagnosed as Polycystic Ovarian Syndrome.

Image 1

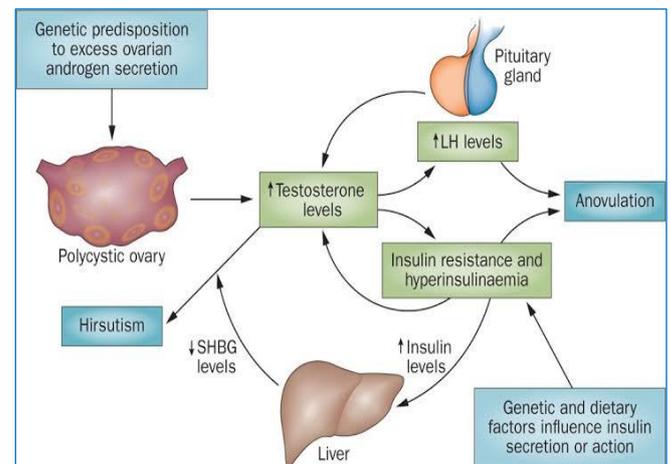


Image describing the pathology of PCOS<sup>[1]</sup>

The pathologies we see that there is an androgen axis; there can be anovulation and subfertility because there is impaired oocyte development due to the decreased levels of FSH (Follicle stimulating Hormone) also increase in LH (Luteinizing Hormone) production in the

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Submission Date: 04/01/2022 Accepted Date: 15/02/2023

### Access this article online

#### Quick Response Code



Website: [www.jaims.in](http://www.jaims.in)

DOI: 10.21760/jaims.8.3.22

body. There will be invariable involvement of pancreas in the form of insulin production and there will be tissue insulin resistance in this and as a response to this there will be certain metabolic complications. This insulin resistance may be due to genetical pre-disposition in the patient, obesity, lifestyle modification or sedentary lifestyle adopted by the patient. To diagnose as polycystic ovarian syndrome, In follicle scanning it resembles the necklace pattern arrangement of follicles in the periphery of the ovarian cortex or in the ovarian cortex, also there should be unruptured 8-10 follicles which are growing to certain extent and they get arrested from further growth at follicle development stage, also increased leptin which plays important role in balancing the diet nutritional factor of the patient.

Image 2<sup>[2]</sup>

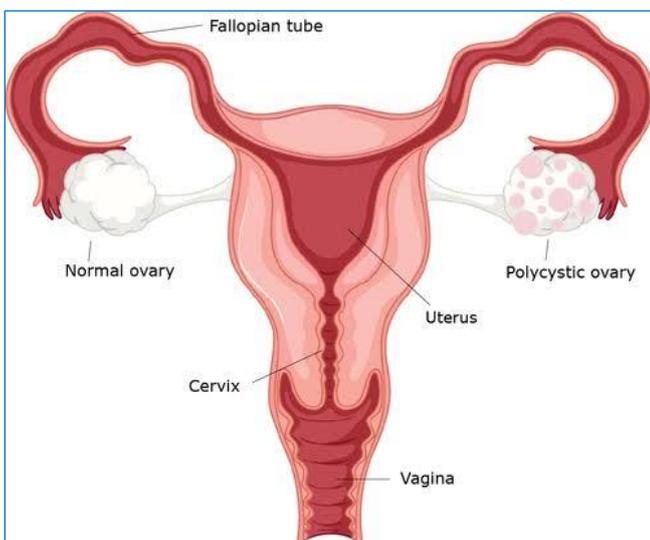
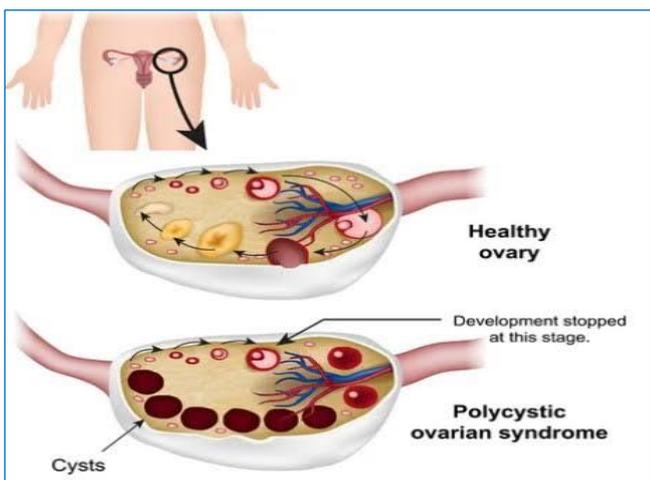


Image 3<sup>[3]</sup>



When all these features are present modern science or when we get a disease complex which we may not find as a disease in *Ayurveda*. Naturally a question arises how to handle a particular disease which has an origin in recent present and description not available in the classical texts. The disease can be diagnosed by considering two aspects that is by seeing the manifestations and analyzing its causes and by looking into the causes and their effects. There is no direct correlation to PCOS in *Ayurveda* but it can be understood as- '*Bahugranthi-Bijakoshiya Vikruthi*'. The question is why does PCOS occurs? The major reasons to which we can attribute to the manifestations of PCOS are either there will be *Bijadosha*, heredity problems or improper food habits, life style disorder. Integrating the principles of *Ayurveda*, *Samprapti* can be understood as PCOS can be classified in 6 stages. *Sanchaya, Prakopa, Prasara, Sthanasamsraya, Vyakta, Bheda*.

The symptoms of PCOS described in the below Table no. 2:

Menstrual Disorder	Infertility	Skin/Hair Problems	Complication
Oligomenorrhoea	Difficulty to conceive	Hairfall/loss of hair on scalp	Obesity
Irregular periods		Excessive hairs on body and face	CAD (Coronary Artery disease)
Pain in lower abdomen		Brown discoloration of skin	Mood disorder
			DM type2
			Hypertension
			Endometrial cancer

If we analyze the *Laxanas* in *Ayurvedic* terminologies such as symptoms of *Sthoulya, Prameha, Granthi* (in ovary), *Ksudra Roga, Khalitya, Artava / Yonivyapat*. In a nutshell we can consider the *Chikitsa* as,

- *Santarpanotta Vyadhi Chikitsa*
- *Chikitsa of Amadosha and Bahu Dosh Avasta*
- *Prameha Chikitsa*
- *Kshudra Roga Chikitsa*
- *Chikitsa of Rakta Dusti*
- *Granthi Chikitsa*
- *Chikitsa of Avarana*
- *Yoni/Artava Vyapat Chikitsa*
  - a. *Shodhana* is the main line of *Chikitsa* in all the conditions above
  - b. Considering the vitiation of *Vata* and association of *Pitta* and *Kapha*
  - c. In the presentation of *Anartava* and *Asrigdhara*, *Vamana* is best line of treatment.
  - d. *Langhana* and *Apatarpana* needs to be continued throughout the course of treatment.
  - e. Considering it as *Vyadhi Sankara*, to resolve the *Granthi- Granthi Chikitsa*, for *Prameha- Prameha Chikitsa*, *Artava Vyapat* its own *Chikitsa Sootra* may also be implemented.
  - f. For manifestations on *Twak - Rasa, Rakta Dusti Chikitsa* can be adopted.
  - g. *Anulomana* of *Vayu* is the key as the *Dushti* and *Vikruti* are in *Apana Kshetra*.

Some of the drugs which are effective in the condition are discussed below:

Herbs with Anti-Androgen properties:

- 1) *Shatavari* - it improves follicular growth and ovulation.<sup>[4]</sup>
- 2) *Haridra* - curcuminoids present in this drug has been proved to have estrogenic, antihyperlipidemic, antioxidant and hypoglycemic effects are useful in managing PCOS and preventing ovarian cell dysfunction and in-turn improves ovulation and fertility.<sup>[5]</sup>

- 3) *Yastimadhu* - contains glycyrrhizin, glycyrrhizic acid, flavonoids, saponins which helps in secretion of insulin, which reduces blood sugar level and contributes to treatment of PCOS.<sup>[6]</sup>
- 4) *Narikela* - regulates the blood levels of FSH and LH. Based on the regulation of hormones, it is helpful in cyst formation in the ovaries.<sup>[7]</sup>
- 5) *Dadima* - contains large amounts of folic acid, vitamin B2, C, pantothenic acid, phenols and phytosterols reduces complications of PCOS.<sup>[8]</sup>

Herbs that restore glucose sensitivity, Estrous cyclicity and enzyme activity:

- 1) *Kumari* - reduces the ovary weight resulting in suppression of androgen secretion. Additionally, it increases the estrogen synthesis. Regulates blood lipid and glucose levels occurs in metabolic disturbances and hence balances PCOS.<sup>[9]</sup>

Ovulation induction agents:

- 1) *Ardraka* - Phytoestrogens, flavonoid and phenolic compounds balances the estrogen to progesterone ratio thus treats PCOS.<sup>[10]</sup>
- 2) *Gokshura* - Furostanol, spirostanol, saponins such as tigogenin, hecogenin, protogracillin normalize estrous cyclicity, steroidal hormonal levels and ovarian follicular growth.<sup>[11]</sup>

**Formulations which will be useful in PCOS:**

***Kashaya/Arishta*** - *Varunadi Kashaya, Triphala Kashaya, Lashuna Erandadi Kashaya, Manjistadi Kashaya, Sapta Sara Kashaya, Lohasava, Vidangarista, Dashamoolarista, Kumari Asava, Lodhrasava.*

***Churna*** - *Shatapuspa, Shatavari, Triphala, Haritaki*

***Gutika/Vati*** - *Shiva Gutika, Rajahpravartini Vati, Chitrakadi Vati, Lashunadi Vatu, Nityananda Rasa, Arogya Vardhini Rasa,*

***Guggulu*** - *Kanchanara Guggulu, Medohara Guggulu, Dashanga Guggulu, Navaka Guggulu*

***Ghrita*** - *Varunadi Ghrita, Phala Ghrita, Sukumara Ghrita, Kalyanaka Ghrita, Tiktaka Ghrita.*

**Solution in Alternative system of medicine:**

- Maintain blood sugar levels
- Exercise
- Diet- more protein, less carbohydrates
- Stress reduction
- Vitamin D
- Myo-inositol
- Acupuncture - to correct HPO axis and opioid system dysfunction

**DISCUSSION**

PCOS is becoming one of the major ailment which occurs in the female population and it manifests that to in the reproductive age of an individual due to which it becomes even more concerning because female reproductive system consists of Hypothalamo-Pituitary-Ovarian axis which maintains the complex mechanism of the body all the systems are inter related to function properly, any imbalance in one of the system or organ will result in manifestation of pathogenesis, since various system are involved in this condition both the physician and the patient should take utmost care in preventing the condition to escalate further. The *Ayurvedic* line of management will help the patients to mitigate the signs and symptoms both physically - where in the most important factor is regulating the menstrual cycle and preventing the complications which usually occurs such as weight gain, diabetes mellitus, hair loss, excessive body hair growth, excessive pigmentation of the skin, primary or secondary infertility problems, etc. and mentally where in patient often find themselves experiencing mood disorders. The most important line of treatment given in *Ayurveda* is *Shodhana* by which the aggravated *Doshas* will be evacuated out of the body along with this some of the important drugs which one can be used in preparing the formulation for this condition are *Ashoka, Ashwagandha, Kumari, Dadima, Putranjiva, Langhali* etc.

**Drugs which possess various pharmacological actions:**

Drugs which induce ovulation: *Shatavari, Putranjiva, Bhallataka, Chitraka* and *Guggulu*.

Drugs which promote ovulation: *Meshashringi, Lathakaranja, Katuki, Pippali, Indravaruni*.

Drugs which acts as Uterine tonic: *Lajjala, Shatavari, Musali*.

Drugs which act as metabolic stimulants: *Guggulu, Brahmi, Shunti, Chitraka, Vidanga*.

Drugs which act as Anti-oxidants: *Bhumiamalaki, Amalaki, Shilajathu, Swarnamakshika*.

Drugs which act as Neurotics: *Brahmi, Shankhapushpi, Mandukaparni*.

**CONCLUSION**

*Ayurvedic* treatment has a holistic approach towards the PCOS. Each patient is given a unique therapy based on the specific health needs. *Ayurvedic* treatment includes herb, therapies and healthy lifestyle to mitigate the condition of the PCOS. Treatment includes the *Shodhana* of the body and also strengthening of the female reproductive system and rejuvenating and regularizing the menstrual cycle. At the same time hormonal imbalance should be corrected, weight management should be done by proper and regular exercises as directed by the physician. Along with these, *Yoga* also plays an important role in correcting the imbalanced hormonal concentration in the body through different *Asanas* such *Navasana, Dhanurasana, Shalabasana, Marjaryasana*, and to reduce and maintain the stress level *Pranayama*, and meditation gives a massive help to the patient.

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**How to cite this article:** Harshitha S., Pramodhkumar N. An integrated approach to understand and resolve Polycystic Ovarian Syndrome. *J Ayurveda Integr Med Sci* 2023;03:120-124. <http://dx.doi.org/10.21760/jaims.8.3.22>

**Source of Support:** Nil, **Conflict of Interest:** None declared.

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